children raises the possibility of respiratory infection, as previously reported in man and birds. The oocyst is small enough to be carried by dust. Much of the inhaled dust (possibly in the form of dried poultry litter) is undoubtedly cleared from the tracheobronchial mucosa by the cilia. It is then swallowed and enters the gastrointestinal tract. Many families in Bangladesh keep their poultry and cattle within their premises. Cryptosporidium was recently detected in 14% of calves with diarrhea and 1% of calves without diarrhea at a dairy farm in Bangladesh, as well as in 8.5% of their handlers with diarrhea. Cryptosporidium was not, however, found in healthy people.

We are now carrying out more extensive studies.


(Accepted 24 September 1984)

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Relation between dentition and dyspeptic disorders

There is a dearth of information relating the state of the teeth to dyspepsia. This study examined a theory that a disproportionately high number of patients with gastric ulcer and gastric cancer were edentulous.

Patients, methods, and results

From a consecutive series of 400 patients undergoing endoscopy 291 patients fell into the four categories of normal endoscopic findings, gastric ulcer, duodenal ulcer, and gastric cancer; their ages and dentition were recorded. By a subsequent questionnaire to 100 of the patients selected at random we determined the chronological relation between total loss of natural teeth and onset of dyspepsia and whether the patients wore dentures at meal times. To investigate the association of each category with dentition, allowing for age, we divided the patients into age groups of five years. Within each group we constructed a contingency table of dyspepsia against dentition. From each of these tables the expected number of patients with dentures within each category of dyspepsia was calculated under the null hypothesis that dentition and disease were unrelated. Finally, we summed the expected numbers of patients with dentures within the categories of dyspepsia over all ages and compared them with the observed numbers. We assessed the significance of the association with a \( x^2 \) test based on the expected and observed numbers in this pooled contingency table.

The table shows the use of dentures by the patients in the four categories and their mean ages: lack of natural teeth indicated the examination of patients with gastric ulcer and gastric cancer. These patients were also older. When the observed numbers of patients with and without dentures were compared with the expected numbers there was no significant association between dentition and category of dyspepsia after allowing for age.

<table>
<thead>
<tr>
<th>Normal findings (n = 85)</th>
<th>Duodenal ulcer (n = 133)</th>
<th>Gastric ulcer (n = 59)</th>
<th>Gastric cancer (n = 14)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observed</td>
<td>38 (45.3%)</td>
<td>46 (78%)</td>
<td>12 (18.6%)</td>
</tr>
<tr>
<td>Expected</td>
<td>43.9</td>
<td>76.7</td>
<td>11.9</td>
</tr>
<tr>
<td>With dentures</td>
<td>54 (55.8%)</td>
<td>76.7</td>
<td>12 (18.6%)</td>
</tr>
<tr>
<td>Without dentures</td>
<td>41.1</td>
<td>76.3</td>
<td>12 (18.6%)</td>
</tr>
<tr>
<td>natural teeth</td>
<td>56.3</td>
<td>76.3</td>
<td>12 (18.6%)</td>
</tr>
<tr>
<td>Mean (SD) age (years)</td>
<td>52.0 (17.7)</td>
<td>54.2 (15.1)</td>
<td>62.2 (12.8)</td>
</tr>
<tr>
<td></td>
<td>75.2 (12.0)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Vascular occlusion and disseminated intravascular coagulation in falciparum malaria

Disseminated intravascular coagulation is the probable cause of the renal, pulmonary, and cerebral complications seen in falciparum but not in benign tertian or quartan malaria, but how the abnormality in coagulation is produced is not known. We suspected that the red blood cells containing parasites might be responsible for initiating disseminated intravascular coagulation in falciparum malaria, and so we compared the procoagulant activity in red blood cells from control patients and from patients infected with Plasmodium falciparum and P vivax.

Patients, methods, and results

Shortening of the one stage plasma recalcification time of normal plasma was taken as an index of red cell procoagulant activity. The plasma was obtained at a time of normal of normal plasma (pool of six samples) observed on each day of the study was taken as 100% in the calculation of the effect